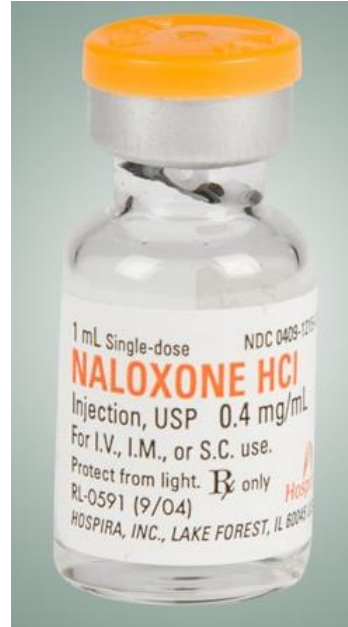


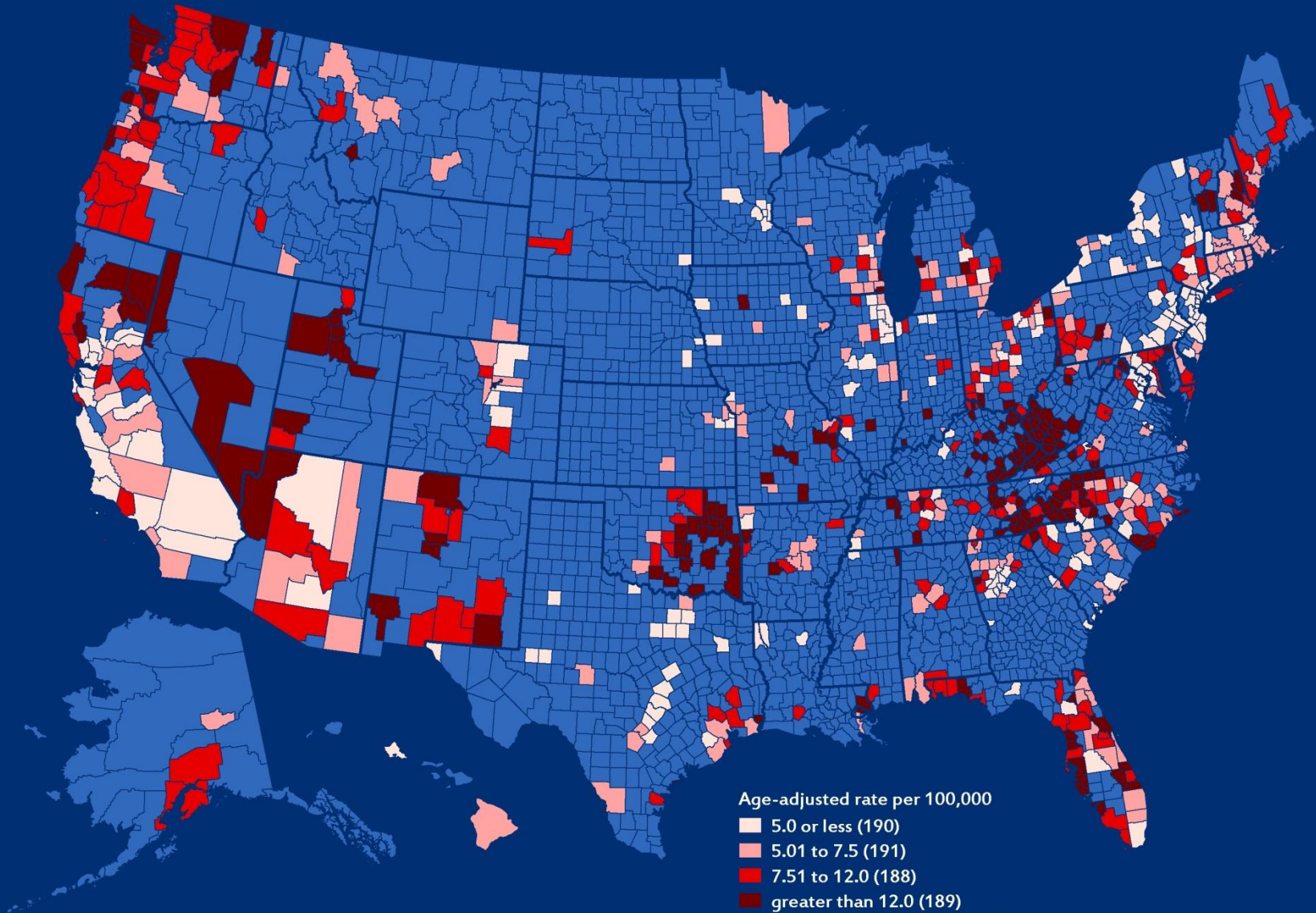
# Overdose Prevention in the Portland Metro Area



Lindsay Jenkins, MPH, MPA

Kim Toevs, MPH

# DRUG POISONING DEATHS INVOLVING HEROIN AND OTHER OPIOID DRUGS, BY COUNTY, 2006-2010



#DrugPolicyReform

Source: CDC

Age-adjusted rate per 100,000

5.0 or less (190)

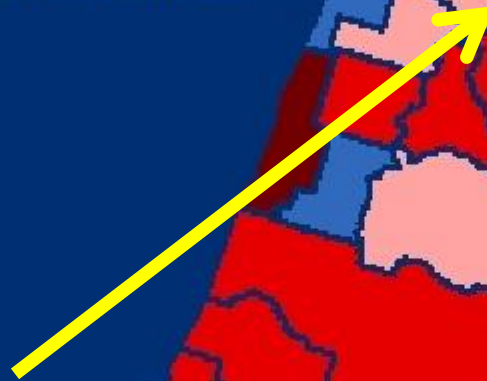
5.01 to 7.5 (191)

7.51 to 12.0 (188)

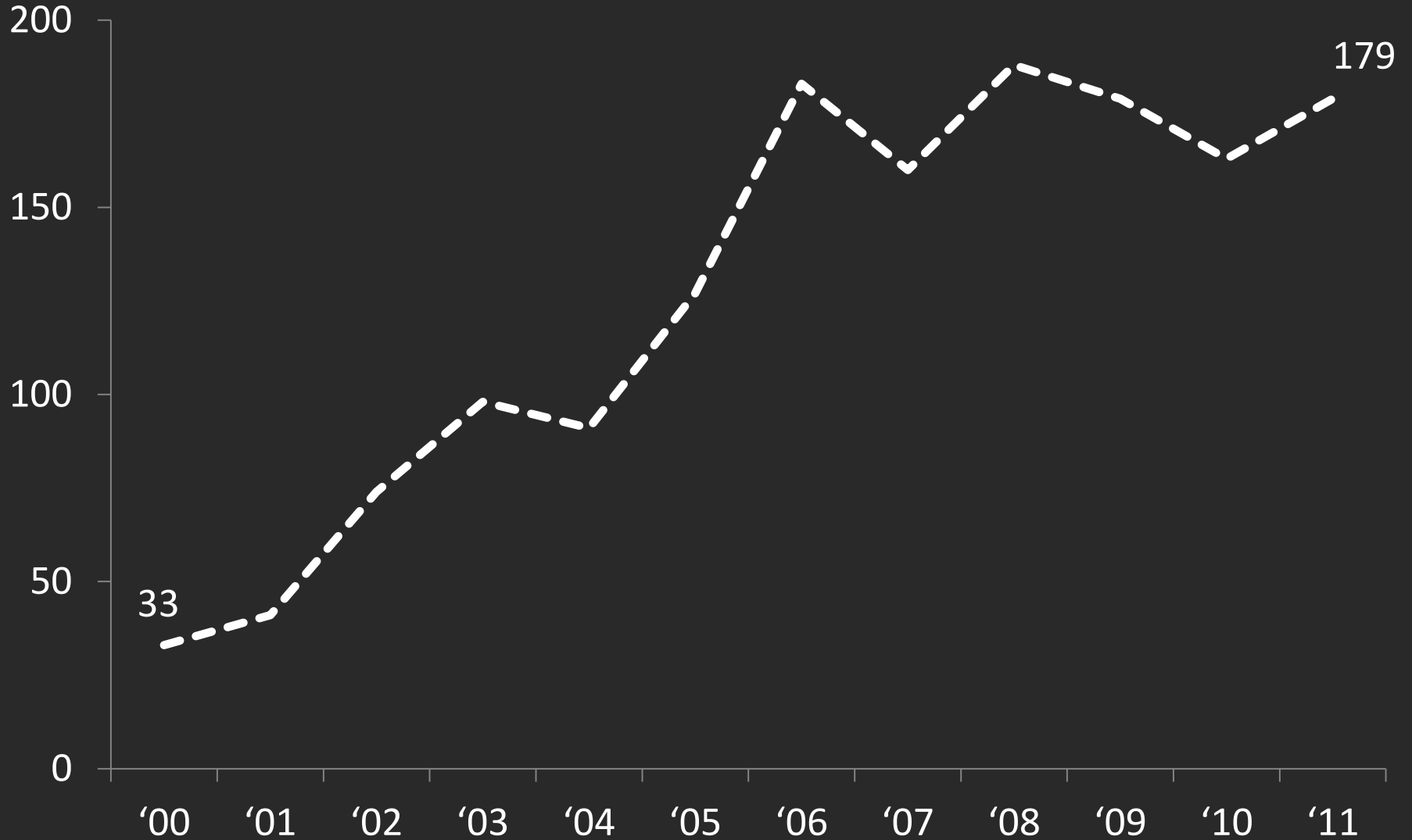
greater than 12.0 (189)

counties with fewer than 20

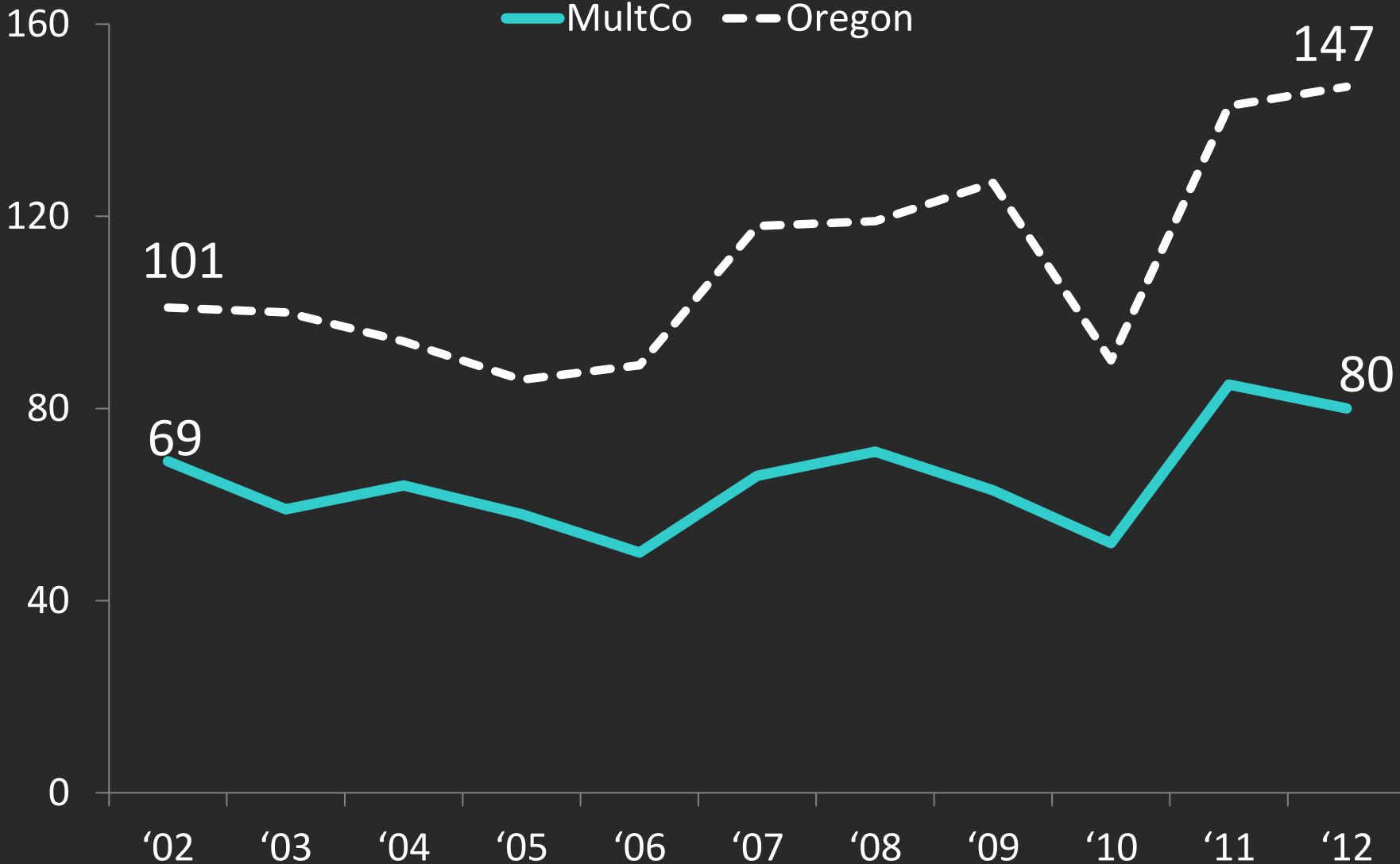
Multnomah  
County



# Rx Opioid-related Deaths (Oregon)



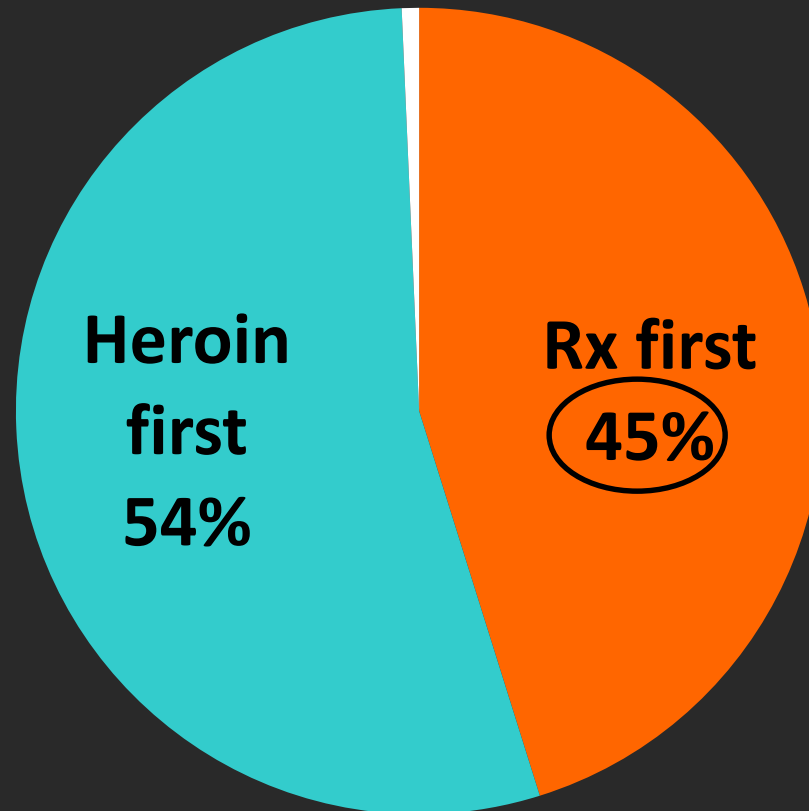
# Heroin-related Deaths



Source: Multnomah County Health Department (MC data) and Oregon State Medical Examiners (OR data)

“Before you began using heroin, were you hooked on prescription-type opiates?”

(n=431)

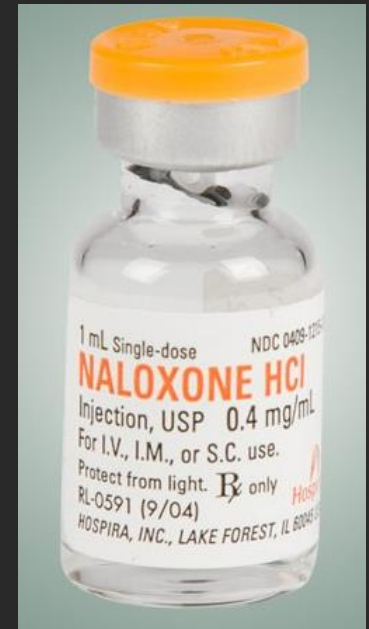


# In 2011, our exchange clients said:

- 58% had seen someone else OD in the last year
  - Of those, 53% called 911
- 58% had overdosed in their life
- 23% had overdosed in the last year

# Will more naloxone make a difference?

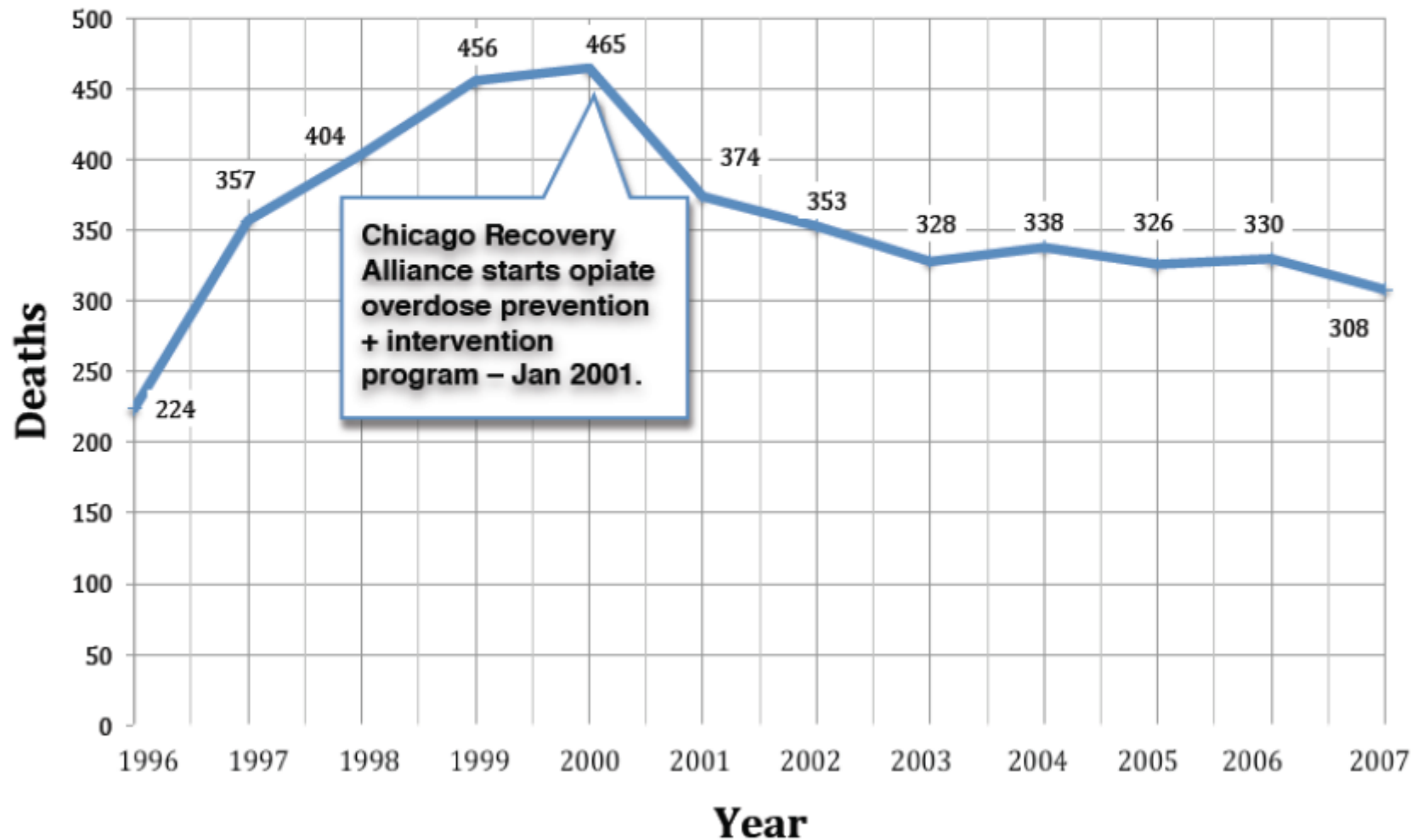
- Pure opioid antagonist
- Overdose antidote
- Administered via injection or nasal aerosolization
- Dose = 100 units/mL, repeat every 3-5 mins as necessary
- Onset of action 3-15 mins
- Duration of action: 30-45 mins



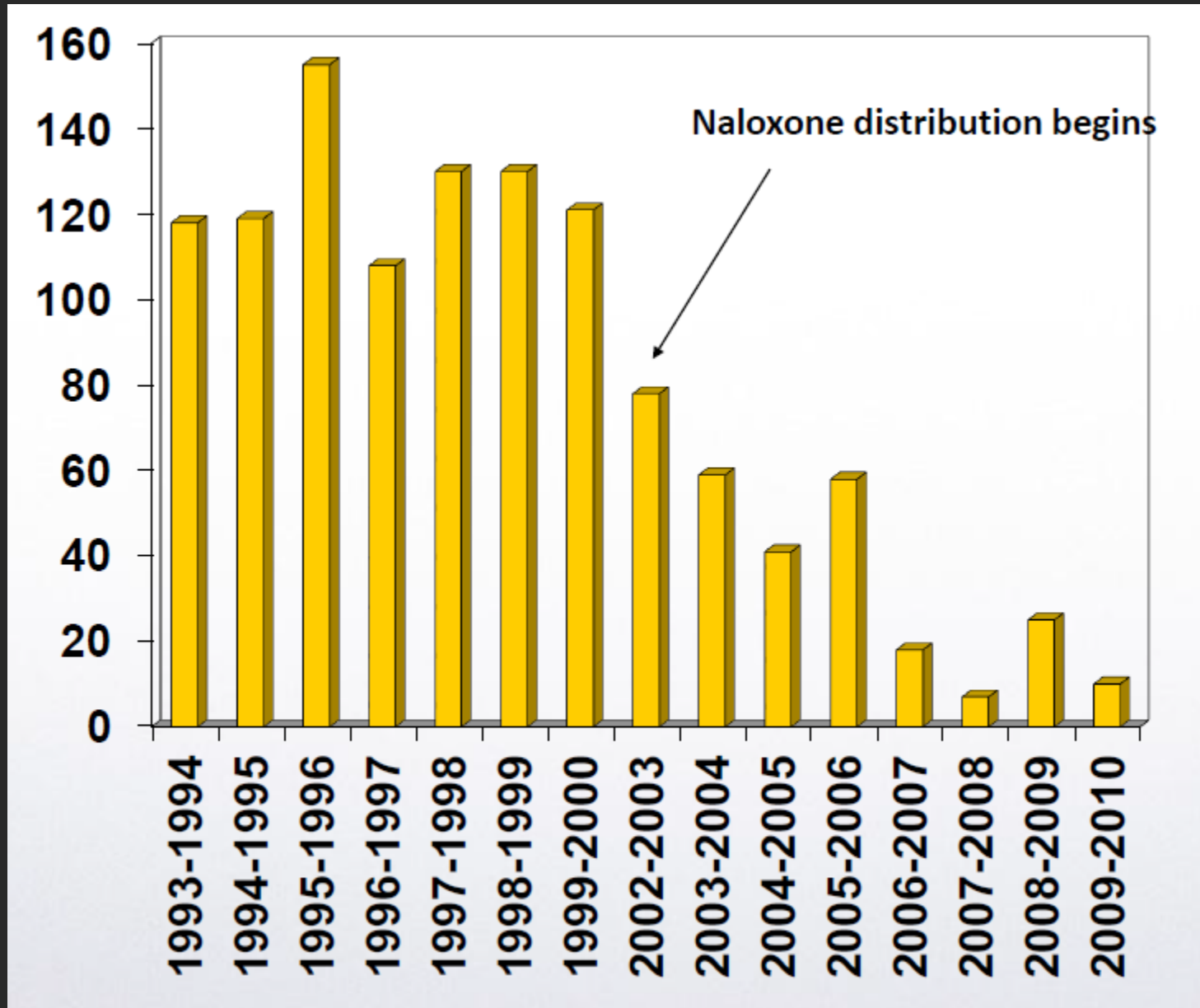


# Heroin-related Overdose Deaths in Cook County 1996 - 2007

Source: Cook County Medical Examiner's Office



# Heroin-related deaths, San Francisco



# Naloxone Distribution in the U.S. 1996 - 2010

- 188 programs
- 53,032 participants
- 10,171 overdoses reversed



Enrolled  
Senate Bill 384

Sponsored by Senators BATES, KRUSE; Senators BURDICK, COURTNEY, DEVLIN, DINGFELDER, GIROD, HASS, MONNES ANDERSON, MONROE, ROBLAN, ROSENBAUM, STEINER HAYWARD, THOMSEN, WINTERS, Representatives GREENLICK, KENY-GUYER, WILLIAMSON (Pre-session filed.)

CHAPTER .....

AN ACT

Relating to opiate overdose treatment; and declaring an emergency.

Be It Enacted by the People of the State of Oregon:

SECTION 1. Section 2 of this 2013 Act is added to and made a part of ORS chapter 689.

SECTION 2. (1) As used in this section:

(a) "Opiate" means a narcotic drug that contains:

- (A) Opium;
- (B) Any chemical derivative of opium; or
- (C) Any synthetic or semisynthetic drug with opium-like effects.

(b) "Opiate overdose" means a medical condition that causes depressed consciousness and mental functioning, decreased movement, depressed respiratory function and the impairment of the vital functions as a result of ingesting opiates in an amount larger than can be physically tolerated.

(2) The Oregon Health Authority shall establish by rule protocols and criteria for training on lifesaving treatments for opiate overdose. The criteria must specify:

- (a) The frequency of required retraining or refresher training; and
- (b) The curriculum for the training, including:
  - (A) The recognition of symptoms and signs of opiate overdose;
  - (B) Nonpharmaceutical treatments for opiate overdose, including rescue breathing and proper positioning of the victim;
  - (C) Obtaining emergency medical services;
  - (D) The proper administration of naloxone to reverse opiate overdose; and
  - (E) The observation and follow-up that is necessary to avoid the recurrence of overdose symptoms.

(3) Training that meets the protocols and criteria established by the authority under subsection (2) of this section must be subject to oversight by a licensed physician or certified nurse practitioner and may be conducted by public health authorities, organizations or other appropriate entities that provide services to individuals who take opiates.

(4) Notwithstanding any other provision of law, a pharmacy, a health care professional with prescription and dispensing privileges or any other person designated by the State Board of Pharmacy by rule may distribute unit-of-use packages of naloxone, and the necessary medical supplies to administer the naloxone, to a person who:

# What does the bill say?

- You can use naloxone on someone else.
- You will not be liable if something bad happens (mostly).
- Someone has to train you:  
<https://public.health.oregon.gov/ProviderPartnerResources/EMSTraumaSystems/Documents/naloxone/naloxone-training-protocol.pdf>
- An MD or NP must “oversee” the training.
- A variety of organizations can train and give naloxone.
- You can also take a prescription to a pharmacy.

WE NOW OFFER  
**RAPID TESTING**  
FOR BOTH  
**HIV** AND **HEP-C!**

**NEW!**

- ☆ ONLY TAKES 20 MIN!
- ☆ NO BLOOD DRAW NEEDED!
- ☆ IT'S FREE AND AVAILABLE  
MON-FRI NOON-4PM!

DO YOU WANT **NALOXONE?**  
RESPOND TO OVERDOSE + SAVE LIVES!

- \* ONLY TAKES 20 MIN TO TRAIN!
  - \* BE AWESOME + HELP YOUR FRIENDS!
  - \* TALK TO HAVEN OR MIKE
- AVAILABLE MOST DAYS

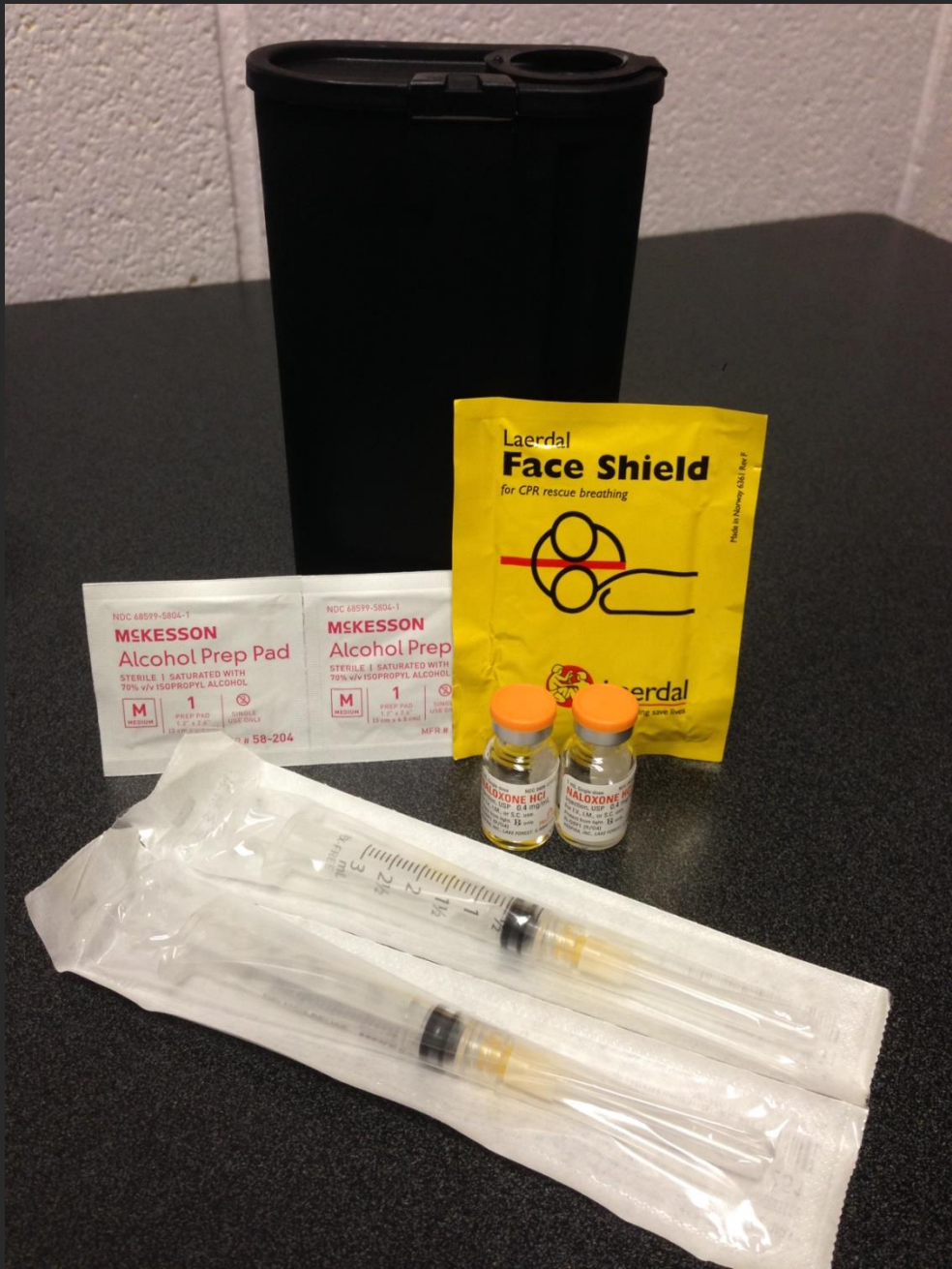
NOON - 4PM



**PLEASE**  
**-DO NOT:-**

- \* BUY, SELL, OR USE WITHIN 3 BLOCKS!!
  - \* LEAVE TRASH/DIRTIES IN FRONT OF EXCHANGE/CHURCH
  - \* HAKAS, ANNOY, DISTURB OR GENERALLY BE A DICK TO OUR NEIGHBORS. DON'T MAKE 'EM CALL THE COPS!!
- ♥ - NEEDLE EXCHANGE STAFF





NDC 48599-5804-1  
**McKesson**  
**Alcohol Prep Pad**  
STERILE | SATURATED WITH  
70% v/v ISOPROPYL ALCOHOL  
M MEDIUM 1 PREP PAD 1.7" x 4.2" 13.5 cm x 10.7 cm SINGLE USE ONLY  
# 58-204

**Laerdal**  
**Face Shield**  
for CPR rescue breathing  
Made in Norway (M) | Part #

**NALOXONE HCl**  
1 mg/10 mL  
10 mL



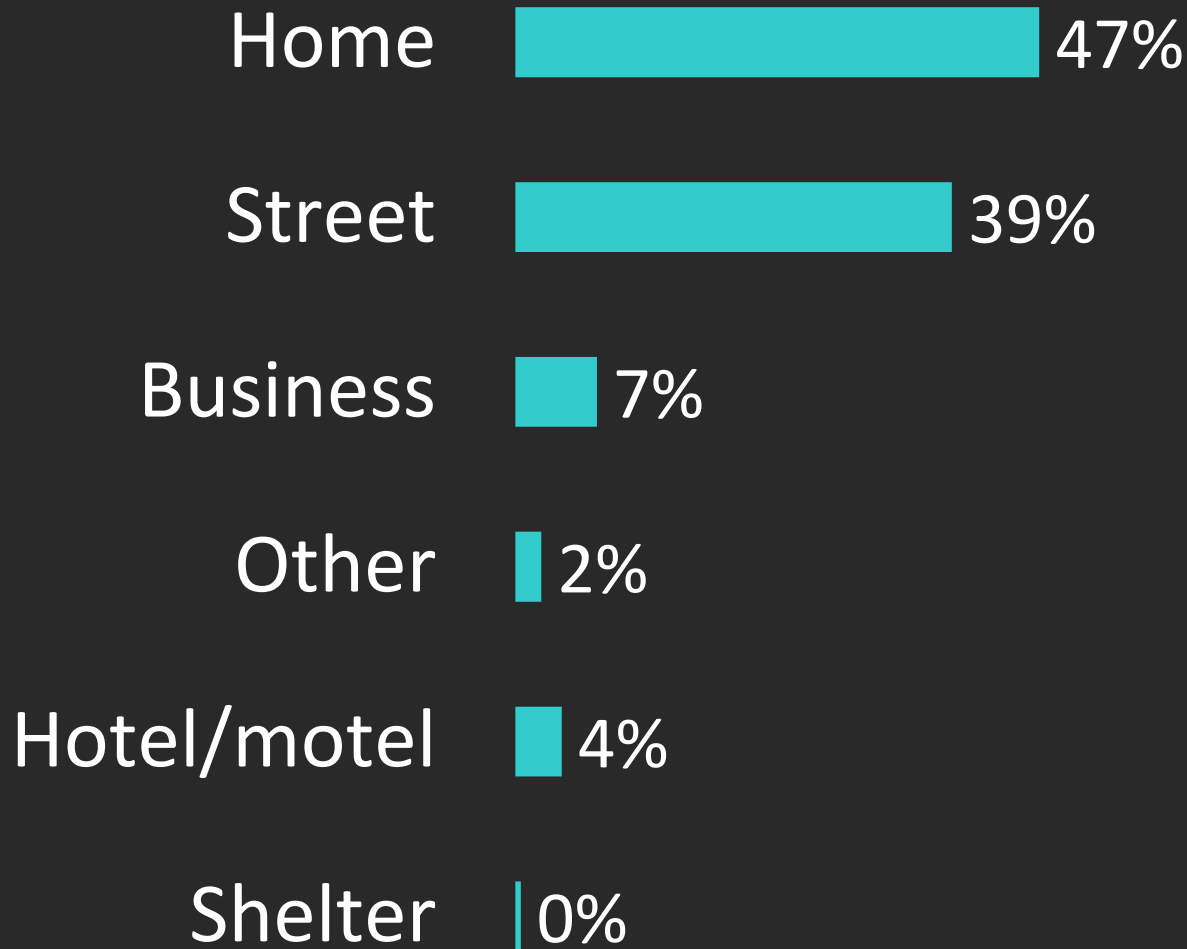


# Outside In + MCHD naloxone

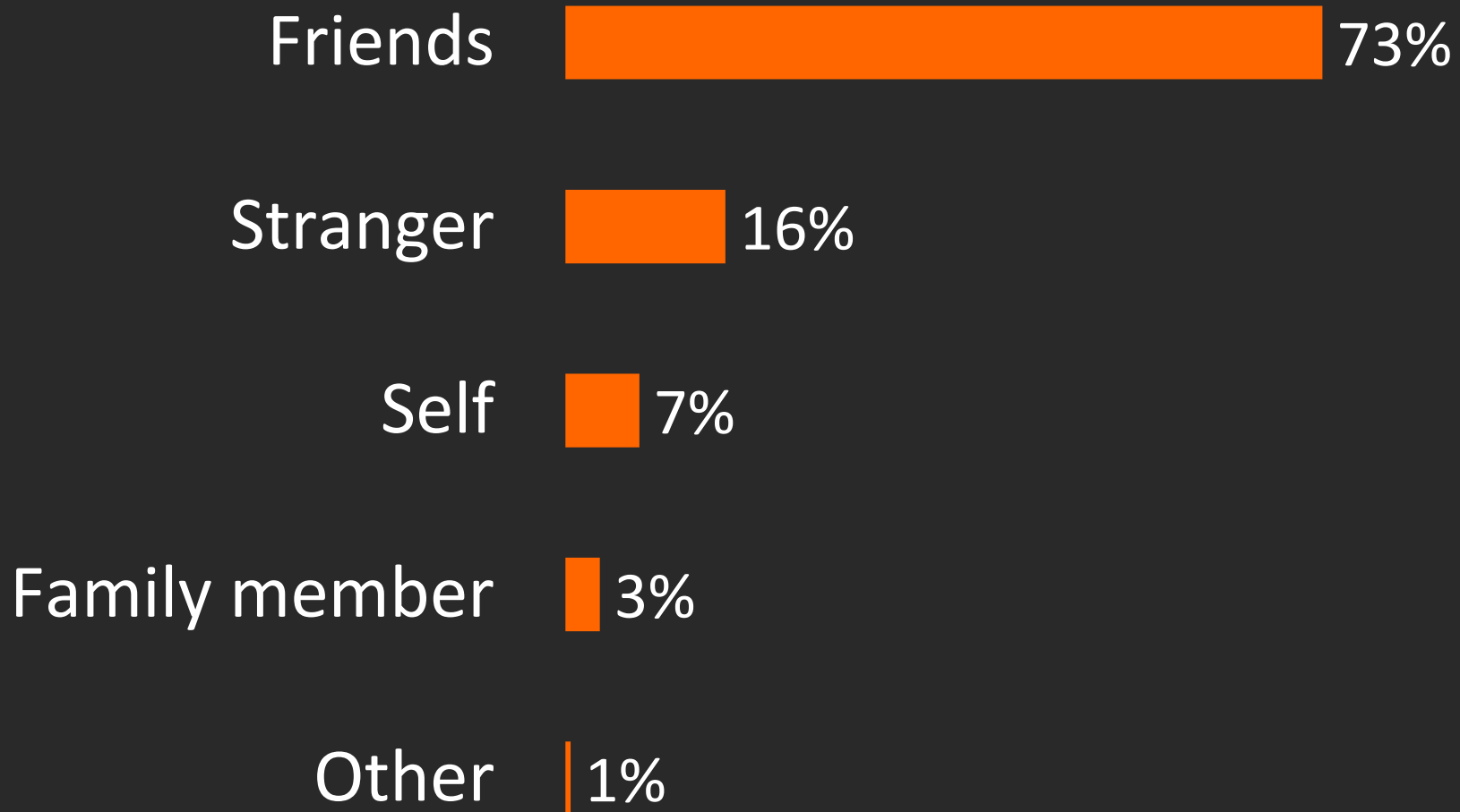
As of Dec 31, 2014:

- 1,416 clients trained
- 604 overdoses reversed

# Where did the overdose happen?



# Who was the naloxone used on?



# What's next?

Beyond syringe exchange:

- Social service providers
- Addictions Treatment providers
- Primary care—co-prescribing with Rx opioids and/or to clients at risk form illicit use
- Corrections, law enforcement
- Pharmacies
- OTC?

# Naloxone Training Video





# NALOXONE KIT

CONTENTS: intranasal naloxone (2 doses),  
rescue breathing mask, and gloves.

Always call 911 when responding to an  
overdose.

# Acknowledgments

- **Outside In staff and volunteers:**

Haven Wheelock, Tanya Page, Kathy Oliver, John Duke, Erin Reid

- **MCHD staff:**

Gary Oxman, Jennifer Vines, Paul Lewis, Kathy Thomes, Claudia Black, Jessica Guernsey, Tab Dansby, Justin Denny, Kim Toevs, Aviel Forster, Maayan Simckes, Carol Casciato, Heather Heater, Erin Browne, Ismael Garcia

- **External:**

Jim Shames (Jackson County), Alan Bates and Jeff Kruse (senators), Eliza Wheeler (Harm Reduction Coalition), Phillip Coffin (SF Health Dept), Caleb Banta-Green (Univ. of WA), Todd Beran (OHA), Geralynn Brennan (OHA), Dagan Wright (OHA), LaKeesha Dumas (Urban League)

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# Questions?

[lindsay.jenkins@multco.us](mailto:lindsay.jenkins@multco.us)